

SESSION: DC-47
VIEWER: #10.5
TAPE: T-629

Boxes are provided to the right of each question. Only one box should be checked for each question asked. If you have any comments which you would like to make emphasizing the accuracy of the information or with reference to any information not generally covered in this format, please write them on the reverse of this page.

Response to Tasking

Responses*

Does information provided satisfy your intelligence collection requirement?

☐ YES ☒ IN PART ☐ NO

Accuracy

Geographical location (terrain, water, river, etc.)

☐ YES ☒ IN PART ☐ NO

Large scale man-made objects (docks, silos, buildings, etc.)

☐ YES ☒ IN PART ☐ NO

Small scale man-made objects (tanks, computers, antennas, etc.)

☐ YES ☒ IN PART ☐ NO

Target ambience (research, production, administration, troop movement, etc.)

☐ YES ☒ IN PART ☐ NO

Activity (nuclear testing, CBR, SIGINT monitoring, etc.)

☐ YES ☒ IN PART ☐ NO

Personality (Physical, plans, actions, traits, etc.)

☐ YES ☐ IN PART ☐ NO ☒

Utility

Please check which best describes the utility of the information provided (in view of what is known at this time, understanding that additional information could raise or lower such an interim assessment at a later date)

☐ VERY USEFUL

☐ USEFUL

☒ MARGINAL

☐ NONE

☐ CANNOT BE DETERMINED AT THIS TIME

*YES - indicates a full agreement with what is known to be fact about the target. NO - indicates a total lack of agreement with what is known to be fact about the target.

Additional tasking

Is additional tasking required?
(If yes, please write what that tasking
is on the back of the form)

☐ YES ☒ NO


Did the attached information add to
information derived from other intell-
igence sources?

☒ YES ☐ NO

Did the attached information aid in tasking
other intelligence resources by providing
targeting information?

☐ YES ☒ NO

SGFOIA3


(Signed) SIGNATURE

ALBERT J. BARI, GS-13

(Printed) NAME, GRADE

Asst Ops Officer 1AGPC-OP

(Printed) TITLE, or OFFICE

SECURITY CLASSIFICATION Approved For Release 2000/08/07 : CIA-RDP96-00788R000500700002-9		FINAL PROJECT EVALUATION FORM							
1. CUSTOMER OFFICE OPERATIONAL GROUP, INSCOM IAGPC-OP		2. INFORMATION REQUESTED DATE <table border="1"> <tr> <th>YEAR</th> <th>MONTH</th> <th>DAY</th> </tr> <tr> <td>1980</td> <td></td> <td></td> </tr> </table>		YEAR	MONTH	DAY	1980		
YEAR	MONTH	DAY							
1980									
3. TARGET COUNTRIES IRAN		4. PROJECT NUMBER 2130A	5. SOURCE NUMBER NFN 240317						
6. NUMBER REPORTS SUBMITTED FOR PROJECT		7. REPORT IDENTIFICATION NUMBERS							
8. REFERENCES A. REQUIREMENTS (CITE) (ICR/CIR/DIRM 3/DIRM 9) <input checked="" type="checkbox"/> B. INITIATIVE REPORT		9. REASON FOR EVALUATION (select one) <input type="checkbox"/> A. ICR RESPONSE <input checked="" type="checkbox"/> B. COLLECTORS REQUEST <input type="checkbox"/> C. SELECTED BY ANALYST							
10. VALUE OF INFORMATION (select one) <input type="checkbox"/> A. OF MAJOR SIGNIFICANCE <input checked="" type="checkbox"/> B. OF VALUE <input type="checkbox"/> C. OF NO VALUE		11. TYPES OF PRODUCTS TO BENEFIT FROM USE OF REPORTED INFORMATION <input type="checkbox"/> A. BASIC INTELLIGENCE <input type="checkbox"/> B. CURRENT INTELLIGENCE <input checked="" type="checkbox"/> C. ESTIMATIVE INTELLIGENCE <input type="checkbox"/> D. S&T INTELLIGENCE							
12. REASON INFORMATION IS OF NO VALUE (select one only) <input checked="" type="checkbox"/> A. TOO FRAGMENTARY <input type="checkbox"/> B. DUPLICATIVE <input type="checkbox"/> C. UNTIMELY <input type="checkbox"/> D. NOT RESPONSIVE TO TASKING CITED		13. DEGREE OF REQUIREMENT SATISFACTION (select one only) <input type="checkbox"/> A. COMPLETELY SATISFIED <input checked="" type="checkbox"/> B. PARTIALLY SATISFIED <input type="checkbox"/> C. NOT SATISFIED AT ALL							
14. NAME OF PRODUCT(S)									
15. COLLECTION GUIDANCE (Mandatory unless 13A, above, is checked) <i>more definitive information would have been of greater value. more specific information regarding locations and personnel would have increased the value of the mission.</i> SG1A									
<div style="background-color: black; height: 50px; width: 100%;"></div>									
<i>mission reports the subject traveling in a black aircraft. He verified through later debriefings. The reported matter concerning subject having an informant and the description provided by the informant closely coincides with subject's debriefings. Some of the</i>									
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~~SECRET~~

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described buildings reported are similar.
 the same time frame worked on during
 the same time frame worked on during

2000/08/07 : CIA-RDP96-00788R000500700002-9

(remarks continued)

The sessions. Consequently, this session, in part, tends to
 verify that subject was in [REDACTED] he did meet with a
 close informant. He did travel in a black car and, SG1A
 did observe buildings similar to what he reported. This
 session somewhat supports the subject's reported itinerary.

17. FOREIGN DISCLOSURE DATA

A. EVALUATORS RECOMMENDATION
(select one only)

- ☐ RELEASABLE EVALUATION NOT REQUESTED
☒ EVALUATION IS NOT RELEASABLE
☐ PARA(S) _____, ABOVE, IS/ARE
 RELEASABLE TO THE GOVT(S) OF _____

B. FOREIGN DISCLOSURE AUTHORITY DECISION
(select one only)

- ☒ EVALUATION IS NOT RELEASABLE
☐ NON-CAVEATED PORTIONS OF THIS EVAL, AS
 INDICATED, MAY BE REL TO THE AUTH REPS
 OF THE GOVT(S) OF _____
 AT THE DISCRETION OF THE ORIGINATOR.

18. EVALUATOR'S NAME

ALBERT J. BARI

19. EVALUATOR'S OFFICE
SYMBOL

IAGPC-OP

20. SECURITY INSTRUCTIONS
(DOWNGRADING, DECLASSIFICATION,
AND SPECIAL MARKINGS)

21. DATE EVALUATED

YEAR

MONTH

DAY

1981

JUNE

10

22. ORIGINATOR OF REQUEST FOR INFORMATION

USAOG, USA INSCOM, FT MEADE, MD 20755

23. (Signature of evaluator)

Albert J. Bari